## **BILL OF SALE**

DATE					
DESCRIPTION OF ITEMS					
AMOUNT PAID					
Seller information:					
Name					
Business Name					
Address					
City/State/Zip					
Phone					
Email					
Buyer information:		nt for the goods and/ Seller Signature)		ribed above.	
Name					
Business Name					
Address					
City/State/Zip					
Phone					
Email					
L	ı				
The buyer has paid for and received the goods and/or services described above.					
(Buyer Signature) (Date)					